STATE OF WEST VIRGINIA State Tax Department, Charitable Bingo/Raffle Unit P.O. Box 1143 **Charleston, WV 25324-1143**



	Name			Account #:		
	Address		Accour			
	City	State Zi	p			
WV/RAF-1 tL178 v 13		OR ANNUAL, LIMI	TED OR STATE FAIR R	RAFFLE LICENSE		
	ayers required to file electr		receive returns for the tax t w.wvtax.gov for additional	ypes subject to the mandatory		
Apply f			one valid annual license. While it is			
			the Rules & Regulations of the State			
conspic	uously displayed at the location wh	nere the Raffle Occasion is he	eld.			
<u>]</u>	PLEASE NOTE: THIS APPLICATION M	IUST BE FILED AT LEAST 60 DA	AYS PRIOR TO THE DATE SCHEDULED	FOR THE FIRST RAFFLE OCCASION		
IS THI	S A RENEWAL APPLICATION	YES	NO (Check One)			
Pho	one Number of Requesting Or	ganization is Required	<u> </u>			
	NAME AND A	ADDRESS OF STAT	E OR NATIONAL ORG	ANIZATION		
Name						
Addre						
		SECTION 1 - TA	X EXEMPT STATUS			
Have yo	ou been granted tax exempt status f	rom the Internal Revenue Ser	rvice? YES N	O (Check One)		
TYPE (OF EXEMPTION LETTER YOUR	ORGANIZATION POSSES	SSES			
50	1(C)3 501(C)4	501(C)8 501(C)	10 501(C)19 501(I	O) (Check One)		
PLEAS	E NOTE: YOU MUST ATTACH	A COPY OF YOUR CURRE	ENT EXEMPTION LETTER TO TH	IIS APPLICATION.		
	CE		ELICENCE (CHECK ON	III)		
	SE	CTION 2 - TYPE O	F LICENSE (CHECK ON	NE)		
	SE ANNUAL LICENSE - \$500.00	CTION 2 - TYPE O	F LICENSE (CHECK OF	NE)		
			F LICENSE (CHECK ON Hour(s) Raffle will be held:	NE)		
	ANNUAL LICENSE - \$500.00 Date of your first Raffle Occasion: LIMITED LICENSE - \$50.00		Hour(s) Raffle will be held:			
	ANNUAL LICENSE - \$500.00 Date of your first Raffle Occasion: LIMITED LICENSE - \$50.00 Date of Raffle:	Date of Raffle:	Hour(s) Raffle will be held:	NE)		
	ANNUAL LICENSE - \$500.00 Date of your first Raffle Occasion: LIMITED LICENSE - \$50.00 Date of Raffle: STATE FAIR LICENSE - \$500.00	Date of Raffle:	Hour(s) Raffle will be held: Hour(s) Raffle wil			
	ANNUAL LICENSE - \$500.00 Date of your first Raffle Occasion: LIMITED LICENSE - \$50.00 Date of Raffle: STATE FAIR LICENSE - \$500.00	Date of Raffle:	Hour(s) Raffle will be held: Hour(s) Raffle wil	Il be held:		
	ANNUAL LICENSE - \$500.00 Date of your first Raffle Occasion: LIMITED LICENSE - \$50.00 Date of Raffle: STATE FAIR LICENSE - \$500.00 Date of your first Raffle Occasion: EXEMPT CERTIFICATE	Date of Raffle:	Hour(s) Raffle will be held: Hour(s) Raffle wil Hour(s) Raffle will be held:	Il be held:		

MAIL TO: WEST VIRGINIA STATE TAX DEPARTMENT Charitable Bingo/Raffle Unit P.O. Box 1143, Charleston, WV 25324-1143 FOR ASSISTANCE CALL (304) 558-8510 For more information visit our web site at: www.wvtax.gov

File online at https://mytaxes.wvtax.gov

WV/RAF-1 rtL178 v 13-web

APPLICATION FOR ANNUAL, LIMITED OR STATE FAIR RAFFLE LICENSE

SECTION 3 - LOCATION OF RAFFLE OCCASIONS							
Address, City, Zip Code & County							
Do you own the premises? YES NO	Do you rent or lease the prem	nises? YES NO					
1	Do you tent of lease the pren	ilses! I ES NO					
List name of owner:	H A COPY OF CURRENT RENTAL OR L	EASE AGREEMENT WITH THE APPLICATION.					
TELLIGE NOTE. TOO MOST ATTAC	THEOLI OF COMENT REVINE ON E	ENDE NORDE MENT WITH THE PATER MINOR.					
SECTION 4 - NAMES OF OFFICERS OF ORGANIZATION							
	STEES, IF ANY, IN THE ORGANIZATIO	ALL OFFICERS AND MEMBERS OF THE BOARD N. ALL OFFICERS MUST BE OVER 18. (ATTACH					
NAME AND TITLE	HOME ADDRESS	HOME TELEPHONE NUMBER					
1.							
2.							
3.							
4.							
	ECTION 5 - PERSONS IN CHA						
LIST NAMES, HOME ADDRESSES AND TELEPHONE NUMBERS OF PERSONS IN CHARGE OF RAFFLE OCCASIONS. THESE PERSONS MUST BE BONA FIDE MEMBERS OF YOUR ORGANIZATION AND RESIDENTS OF THE STATE OF WEST VIRGINIA. ANNUAL LICENSES REQUIRE 3 NAMES. LIMITED LICENSES REQUIRE AT LEAST 2 NAMES. ONE OF THESE PERSONS MUST BE PRESENT AT ALL RAFFLE OCCASIONS. ALL PERSONS IN CHARGE OF RAFFLE MUST BE OVER 18.							
NAME AND TITLE	HOME ADDRESS	HOME TELEPHONE NUMBER					
1.							
2.							
3.							
SECTION 6 - NAME	OF HIGHEST ELECTED OF	FICER AND APPOINTED DESIGNEE					
LIST NAMES, HOME ADDRESSES AND HOME TELEPHONE NUMBERS OF THE HIGHEST ELECTED OFFICER AND HIS OR HER APPOINTED DESIGNEE OF THE ORGANIZATION. ONE OF THESE PERSONS MUST BE PRESENT AT ALL OCCASIONS. ALL PERSONS MUST BE OVER 18.							
NAME AND TITLE HIGHEST ELECTED OFFICER	HOME ADDRESS	HOME TELEPHONE NUMBER					
1.							
APPOINTED DESIGNEE							
2.							

SECTION 7 - YOU MUST ANSWER THE FOLLOWING QUESTIONS

Has your raffle license application ever been refused, denied, revoked, or suspended?

YES NO (Circle One)

Has any person in your organization who will participate in any manner in the conduct of Raffle games or related concessions been convicted of a felony or misdemeanor for a gambling offense within the past 10 years? YES NO (Circle One)

If you answered yes to any of these questions, attach a separate sheet explaining.

APPLICATION FOR ANNUAL, LIMITED OR STATE FAIR RAFFLE LICENSE

SECTION 8 - NAME OF RAFFLE DISTRIBUTOR								
You must list the name, address and phone number of the distributor(s) where you purchase your raffle supplies.								
NAME OF DISTRIBUTOR	ADDRE	SS	TELEPHO	ONE NUMBER				
1.								
2.								
SECTION 9 - DISPOSITION OF PROCEEDS								
Recipient of Proceeds:								
Does this recipient have an Internal Revenue Service Exemption Letter? YES NO (Circle One)								
Intended use of Proceeds:								
PLEASE NOTE: YOU MUST LIST THE NAMES OF ALL ORGANIZATIONS YOU INTEND TO DONATE PROCEEDS TO. ATTACH SEPARATE SHEET IF NECESSARY.								
SECTION 10 - PROOF OF EXISTEN	ICE (NOT	REOU	IRED FOR RENEV	VAL APPLICANTS)				
HAS YOUR ORGANIZATION BEEN IN EXISTENCE IN	`			,				
YES NO (Circle One)	WEST VIKO	INIA I WO	TEARS I RIOR TO FIEIN	d This ATTLICATION.				
IF YES, YOU MUST ATTACH DOCUMENTARY PROOF. THIS DOCUMENT IS NECESSARY TO QUALIFY FOR A RAFFLE LICENSE.								
SECTION 11 - CONCESSIONS								
WILL A CONCESSION BE OPERATED?	YES	NO	(Circle One)					
WILL THE LICENSEE OPERATE THE CONCESSION?	YES	NO	(Circle One)					
PLEASE NOTE: IF THE CONCESSIONS ARE TO BE OPERATED BY SOMEONE OTHER THAN THE LICENSEE, A COPY OF ANY AGREEMENT OR AN EXPLANATION OF ANY ORAL AGREEMENT PROVIDING ANY COMPENSATION TO THE OPERATOR OF THE CONCESSION MUST BE ATTACHED.								
SECTION 12 - AGREEMENT								
I fully understand that it is a violation of Chapter 47, Article 21 to allow anyone other than authorized persons to conduct any part of the Raffle Games or concessions; That I am required to file reports and keep records as provided by Article 21; That it is a crime to violate any provisions of Article 20; That a violation may result in suspension and/or revocation of the license and possible denial of future license applications								
I,, AS AN AUTHORIZED REPRESENTATIVE OF								
KNOWLEDGE (Name - Type or Print)		(Signat	ire)	(Date)				
(Telephone Number)		(Email	Address)					